

existence of placental sinuses, and their communication with the vessels of the uterus. His labors, therefore, confirm the views of the Hunters, Reid, and Goodsir, and are in opposition to those of Lee and Robin. The injections of the Hunters and Weber were, however, open to the objection that the vessels may have been ruptured, thus allowing the filling of the placental vessels from those of the uterus. But by substituting air for the substances ordinarily used in injection, Dr. Dalton has been able to obviate any liability to this accident, and has, consequently, more positively demonstrated the point in question than his predecessors.

The second memoir "On the Rapidity and Extent of the Physical and Chemical Changes in the Interior of the Body," was read in March last, and though not possessing the originality of the first, is, nevertheless, very interesting, and the information it contains is communicated in an agreeable and forcible manner. The essay bears evidence of being the result of considerable research and reflection, and will amply repay the perusal of those who are unaware of the extent to which the zoo-chemical processes of the body are conducted, and have not the opportunity of referring to the original investigations of Vierordt, Bidder and Schmidt, Colin, and others who have identified themselves with this department of biological science. The main facts will also be found incorporated into the author's excellent treatise on physiology; but in the memoir before us they are presented in a much more connected manner than is possible in a work devoted to physiology in general, and therefore exhibit a more striking view of those great organic actions which maintain the integrity and vitality of the animal system.

W. A. II.

ART. XVIII.—*Report of the Committee of the City Council of Charleston, upon the Epidemic Yellow Fever of 1858.* 8vo. pp. 69. Charleston, S. C., 1859.

THE Committee appointed by the municipal council of Charleston, appear to have investigated with a good deal of care all the facts connected with the occurrence of the yellow fever in that city, during the summer of 1858, with the view to ascertain, if possible, whether the disease was traceable to an imported contagion, or originated from evident local sources of malaria within the city.

By the results of the Committee's labours it is shown, most clearly, that the first cases of yellow fever occurred, in 1858, within a district of the city, the air of which was especially unwholesome, and in a house disgusting from the amount of filth in and about it, and that these cases could not be traced to any foreign source of infection.

The first case of the fever occurred in a city policeman, who was attacked on the tenth day of July, and died on the eighteenth. This person is supposed to have contracted the disease from a relation who came to his house on the 28th of June, from on board a steamer just arrived from Havana. The steamer, however, is reported to have been in a perfectly healthy condition, and the passenger from on board of her, just referred to, it is most certain never had the yellow fever.

The steward of this same steamer arrived in the city on the seventh of July, and put up at the same house with the policeman and his relative. He is reported to have been drunk on board the steamer; was severely beaten; continued to be drunk on shore; exposed himself to the pouring rains that fell at the time; slept in his wet clothes, so saturated with water as to require that his bed and bedding should be dried and sunned. He is represented by his family and others as one crazy from repeated intemperance and debauch. In this condition he sickened on the 12th, and died on the 15th of July, from a second attack of supposed yellow fever.

The cook of the same steamer came up to the city on the evening of the 8th July, putting up at his brother's house; a different one from that above referred to, but in the same locality. He remained with his brother until the morning

of the 10th; feeling then unwell, he determined to return to the steamer; got worse that night, and on the 11th was sent to the lazaretto, and died there on the 16th of yellow fever.

This was the first case which came from on board the steamboat, that was accused of introducing the fever into Charleston. Up to this time—twelve days from the date of her arrival—she had remained perfectly healthy, and no case occurred on board of her subsequently. Nor does there appear to be the shadow of evidence to show that any case of yellow fever appeared in the house where this person put up in the city of Charleston, sufficiently early to permit us to refer it to a contagion derived from him. The first case of disease occurred in his brother, who was seized with intermittent fever August 16th, and was discharged well on the 22d. Two cases of yellow fever, one in a female and the other in a male, occurred, it is true, in the same house, but not until September 6th and 29th. The latter terminated fatally on October 5th. Thus, it will be seen that thirty-seven days intervened between the cook's visit to his brother and the date of the latter's sickening with intermittent fever, and forty-five days before the first case of yellow fever occurred in the house where he put up.

From the first to the 12th of August, yellow fever became generally diffused over the city, attacking the unacclimated foreigner and the adolescent native; and constituting an epidemic of a fearful character, long to be remembered for its mortality.

Almost contemporaneous with the occurrence of the disease in the city of Charleston, it made its appearance at Moultrieville, Sullivan's Island, and among the garrison of Fort Moultrie. Its introduction here was attributed to a passenger landed, on the 30th of August, from on board the steamer to which reference has been already made. The gentleman was in perfect health. He did not enter the city of Charleston, but went direct to Sullivan's Island. That, however, the disease in this place could not have been derived from him is very certain. That, also, it was not generated from any contagion imported from abroad on board the vessel in which that gentleman came passenger, a simple statement of facts will show conclusively.

It is to be recollected that the steamer did not arrive at quarantine until the 28th of August, and yet five cases of yellow fever had already occurred among the soldiers, the first of them sixteen, and the last of them two days before the steamer entered the harbour of Charleston. Yellow fever, we may remark, has always prevailed on Sullivan's Island when epidemic in Charleston.

The entire number of cases of yellow fever which occurred at Charleston, during the epidemic of 1858, was 1571; of these, 1126 recovered, and 445 died.

In respect to the causes to which may be attributed the occurrence of the epidemic of 1858, the Committee refer to the filthy condition of the streets—the defective scavengering—to the employing the filth and garbage collected from the highways as a material for filling up low lots, streets, etc.; the collecting of manure heaps, cow-stables, pig-pens, etc., within the city limits; the bad construction and foul condition of privy-wells and cesspools; the crowded burial grounds which exist within the very centre of the most populous parts of the city; the imperfect system of public and private sewerage, and the condition of the public drains.

In the letters contained in the report, presenting the opinions of several of the oldest medical practitioners of Charleston, in regard to the etiology and mode of propagation of the yellow fever, there will be found a very great unanimity expressed by these gentlemen in their belief as to the local origin of the disease and its non-contagious character. They nearly all point to the fact that the limits of the yellow fever locations—the infected districts—are gradually extending themselves in proportion as in the progress of public and private improvements the low portions of the city are becoming filled up by the deposition in them of garbage, sawdust, chaff, and other refuse and decomposable materials; while there is exhibited an entire neglect of the important lessons in respect to civic hygiene derived from the experience of former years, and other cities.

The conclusion which the Committee deduce from the facts adduced by them, are:—

“That if yellow fever is introduced by importation, it cannot become epidemic,

except by *common* causes, that is, the atmosphere of Charleston must be in the same condition as the atmosphere of Havana, or elsewhere, from local causes, to produce or favor an epidemic; and if not in this like condition, no epidemic can possibly result from such importation.

"Charleston and other cities of the United States charge Havana with inflicting this terrible disease upon them; and Havana, on the other hand, attributes the sin of yellow fever to Siam—asserting that it never existed there until it was imported into the city from Siam. Be this true or not, it is very certain that it existed in Greece; and the very same disease that now prevails in the West Indies, Charleston, and other cities on the Atlantic coast, was described by Hippocrates nearly 300 years before the birth of Christ.

"This illustrious Greek," says Professor Potter, "observed the disease he so well describes in the mild climate of his native soil, almost in the parallel latitude in which we live. He speaks a language without disguise, susceptible of but one interpretation. The *tout ensemble* of his faithful picture portrays the disease in colours as glowing as those of Chisholm, Rush, Geddings, or Dickson. He enumerates the more prominent symptoms, under the following appellations: *Καυσος* (*causos*), a burning (inflammatory?) fever, attended with excessive thirst; *Τυφος* (*typhos*), a stupor or coma; *Φρενιτις* (*phrenitis*), an inflammation of the brain or its investing membranes (*acute delirium?*); *Ικτερος* (*Icteros*), a yellowness of the skin; and he caps the climax of the malignant picture by the words *Μελανὰ ἐμετον* (*Melana emeton*), black vomit; and *Μελανὸν ἐμετον* (*melanon emeton*), the vomiting black matter." * * "In burning fevers," says Hippocrates, 'yellowness of the skin, on the fifth day, especially if accompanied by a singultus, is a sign of great malignancy.' These symptoms are seen during every epidemic in Charleston." D. F. C.

ART. XIX.—*Contributions to Midwifery, and Diseases of Women and Children, with a Report on the Progress of Obstetrics, and Uterine and Infantile Pathology in 1858.* By E. NOEGGERATH, M. D., and A. JACOBI, M. D. New York, 1859, Bailliere Brothers. 8vo. pp. 466.

THIS is the first volume of what is intended to be—if we understand the editors aright—an annual register of the leading contributions to obstetrics, and to uterine and infantile pathology and therapeutics—embracing a notice of every original article or monograph published during the preceding year, which appears to present anything of importance; with a record of the titles at least, of those of less value, or which are beyond the reach of the editors.

The conception and plan of the work are excellent. If these be carried out with the same ability that is evinced in the preparation of the volume before us, it cannot fail to become a most valuable repertory of the recent facts and observations, contributed by the leading contemporary authorities of our profession, especially those of continental Europe; which will thus be rendered accessible to the physicians of this country.

It is most certain that, with the large and important additions which are constantly being made to almost every department of medical science and practice, but more especially to our knowledge of the pathology and treatment of the diseases of women and children, through the medium of either monographs of more or less pretension, transactions of medical societies, or contributions to the professional journals of our own and other countries, it is with difficulty that the student of the present day is able to make himself acquainted with the actual progress and condition of our science in general, or in reference to the particular branches in which he is the most interested. Few have the time and still fewer the means to procure and consult each new medical publication as it appears, and the various professional transactions and periodicals, both domestic and foreign, with the view of culling from them whatever they may present of new and valuable. Some one with the time, talents and facilities required for its execution, must take upon himself the task of col-